

Testimony of Paul Sullivan 03-12-2010

Senator Harris, Representative Ritter and Members of the Public Health Committee, I'm Paul Sullivan, Chief Executive Officer, American Red Cross – Connecticut Blood Services Region.

Thanks to your support in the last several years, we have made great inroads in increasing our donor base as we strive towards self sufficiency in the State's blood supply. Thanks to a grant from the State in 2008, we have significantly increased our Hispanic blood donor population, thereby increasing the availability of key blood types. We appreciate your support of a strong blood program in Connecticut.

I will address the three sections outlined in the proposed act. In Section One, we support the provision to resume apheresis operations; and do not support the requirement to have a nurse at every blood drive. In Section Two, we oppose legislation that impacts how we compensate employees and interferes with our ability to recruit blood donors. In Section 3, we support the ability of 16-year olds to donate blood.

Starting with Section One – Our Apheresis programs are significantly scaled back based on a finding by the DPH which applies a statute that relates to patient care and the collection of blood products from healthy donors. We support this legislation which would restore our ability to operate as we have for many years and is consistent with blood collection operations in other states. The Apheresis program provides critical blood products to Connecticut hospitals.

Apheresis blood collections have been proven safe and effective both in clinical trials and in our operations. During an apheresis procedure, the staff does not adjust rates of infusion or make independent decisions except to cease a procedure, which can be done any time, if needed.

These units of critically needed platelets and red cell blood types are crucial to the Red Cross efforts to provide blood products essential to the survival of many patients. Across the United States, the Red Cross conducts roughly 780,000 apheresis procedures annually.

On November 6th, we announced that because of a decline in blood donations primarily due to the discontinuation of the Apheresis Program, we could not maintain current staffing levels and layoffs were necessary.

In Section Two, we oppose legislation that impacts and changes how we compensate employees who work with sponsors to schedule blood drives as it directly interferes with our ability to recruit blood donors. Our pay structure is effective and rewards those staff members who meets or exceeds targets; and protects us from rewarding staff who do not perform as well. Providing incentives for performance is standard practice at blood banks across the country. Legislation that impacts our ability to efficiently recruit blood donors would hurt our ability to support patients. We ask you not to support any legislation that would negatively impact our ability to recruit and collect blood for patients.

In Section 3 – we support 16 to donate in Connecticut with parental consent. In Connecticut, 16-year olds are at a disadvantage to their peers in surrounding states when it comes to blood donation. All the states bordering Connecticut have passed 16-to-donate legislation and these teens are active blood donors enthusiastically demonstrating community involvement by donating blood. Today, 33 states now allow 16-year olds to donate. We encourage you to allow 16 year olds to donate with parental consent.